

Atty Docket No.: 03226/452002; P6353 CON

Inventor: David Curbow et al.

Application No.: 10/616,161-Conf. #9756 **Filing Date:** July 8, 2003
Title: SYSTEM AND METHOD FOR DELIVERING PARKING INFORMATION TO
MOTORISTS

Documents Filed:

Revocation and Substitution of Power of Attorney (3 pages)
Transmittal (1 page)

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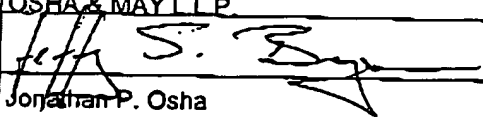
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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/616,161-Conf. #9756
		Filing Date	July 8, 2003
		First Named Inventor	David Curbow
		Art Unit	3661
		Examiner Name	M. Y. Marc Coleman
Total Number of Pages In This Submission		Attorney Docket Number	03226/452002; P6353 CON

ENCLOSURES (Check all that apply)

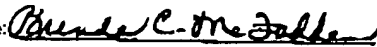
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard Revocation and Substitution of Power of Attorney Under 37 C.F.R. Section 1.36
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	OSHA & MAY LLP		
Signature			
Printed name	Jonathan P. Osha		
Date	October 25, 2004	Reg. No.	33,986

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: October 25, 2004

Signature:  (Brenda C. McFadden)